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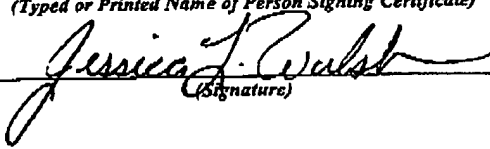
OFFICIAL

Applicant: KEVIN R. KEEGAN)
Serial No: 09/884,527) Group Art No.:
Filed: June 18, 2001) 1746
For: HEATED INTERCONNECT) Before the
Examiner:
Jonathon Crepeau
)

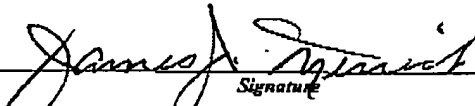
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AMENDMENT

In response to the Office Action of September 18, 2003, please amend the application as follows:

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. DEP-0186
Applicant(s): KEVIN R. KEEGAN			
Serial No. 09/884,527	Filing Date 06/18/2001	Examiner Jonathon Crepeau	Group Art Unit 1746
Invention: HEATED INTERCONNECT			RECEIVED CENTRAL FAX CENTER NOV 13 2003
<div style="text-align: right;">OFFICIAL</div>			
I hereby certify that this <u>Transmittal and Amendment</u> (Identify type of correspondence)			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9311</u>)			
on <u>November 13, 2003</u> (Date)			
<div style="text-align: center;">Jessica L. Walsh (Typed or Printed Name of Person Signing Certificate)</div> <div style="text-align: center;"> (Signature)</div>			
Note: Each paper must have its own certificate of mailing.			

P18/REV01

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. DEF-0186	
Applicant(s): KEVIN R. KEEGAN					
Serial No. 09/884,527	Filing Date 06/18/2001	Examiner JONATHON CREPEAU	Group Art Unit 1746		
Invention: HEATED INTERCONNECT					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	25 -	25 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 James J. Merrick Reg. No. 43,801 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 860-286-2929 Customer Service No. 22851 Confirmation No. 2648			Dated: November 13, 2003		
CC:			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		